PART B - FEE(S) TRANSMITTAL

FIRST NAMED INVENTOR

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APPLICATION NO.

10/685,414

CUSTOMER NUMBER

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FILING DATE

10/16/2003

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

CONFIRMATION NO.

785 I

ATTORNEY DOCKET NO.

Q77739

TITLE OF INVENTION: FAILURE LOCALIZATION IN A TRANSMISSION NETWORK								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICAT FEE	ION PRE	V. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440.00	\$300.00)	\$0.00	\$1,740.00	12/25/2007	
EXAMINER			ART UNI	IT CI	ASS-SUBCLASS			
Chi Ho A. LEE			2616		370-217000			
1. Change of correspondence address or indication of "Fee Address" (37 Cl					ng on the patent front		hrue Mion, PLLC	
□ Change of correspondence address (or Change of Correspondence Ad PTO/SB/122) attached.				dress form (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47 03-02 or more recent) ATTACHED. Use of a Customer Number is required.				member a registered attorney or agent) and the 3 names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be				
printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
ALCATEL Paris, France								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🗆 Individual 🗹 Corporation or other private group entity 🗆 Government								
				4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)				
☑ Issue Fce		☑ A check is enclosed.						
☑ Publication Fee (No small entity discount permitted)				□ Payment by credit card. Form 1310-2038 is attached.				
☐ Advance Order - # of Copies				□ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880 (enclose an extra copy of this form).				
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5. Change in Entity Sta	itus (from status indic	ated above)						
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.								
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.								
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Jacon; and Tradepark Office.								
Authorized Signature				Date		December 21, 2007		
Typed or Printed Nam	е [David J. Cushing	- /	Registration No.	No. 12/26/2007 (12/26/2007 CHGUYEN3 897890011 10605414		
					91 FC:1591		1449.00 OP	
Modified PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010. 62 FC:1384 380.88 0P								